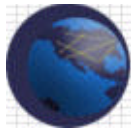


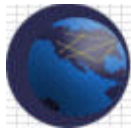
**Tissue Banks and Pathology Tools Workspace Teleconference**

<b>Date, Time &amp; Location:</b>	Tissue Banks and Pathology Tools Workspace Teleconference, 12:00-1:00pm, 8/17/04
<b>Attendees:</b>	<p>NCI/BAH</p> <ul style="list-style-type: none"> <li>• Greg Eley</li> <li>• Leslie Derr</li> <li>• Steve O’Krepky</li> </ul> <p>University of Alabama</p> <ul style="list-style-type: none"> <li>• Bill Grizzle</li> </ul> <p>Washington University</p> <ul style="list-style-type: none"> <li>• Mark Watson</li> </ul> <p>University of Pennsylvania</p> <ul style="list-style-type: none"> <li>• Mike Feldman</li> </ul> <p>Memorial Sloan Kettering CC</p> <ul style="list-style-type: none"> <li>• John Speakman</li> </ul> <p>Dartmouth University</p> <ul style="list-style-type: none"> <li>• Barbara Schaeffer</li> </ul> <p>Jackson Laboratories</p> <ul style="list-style-type: none"> <li>• Debbie Krupke</li> <li>• Barbara Tennent</li> </ul> <p>Virginia Commonwealth University</p> <ul style="list-style-type: none"> <li>• Lynn Penberthy</li> </ul>
<b>Agenda Item #1: New/old Business</b>	<ul style="list-style-type: none"> <li>• Bill Grizzle made the suggestion that it would be necessary to have a review of the current state of tissue and specimen tracking systems before having the face-to-face meeting. He said that there needed to be a clearer sense of the present architecture, interface, and networking systems capabilities currently in the community before building something from scratch. The idea is two fold: 1) build wrappers around existing systems in wide spread use, 2) create caTISSUE from openly available and appropriate modules that can easily be made caBIG compatible, rather than build new systems from scratch</li> <li>• It was suggested that a survey of centers with large databases centers for existing systems so as to get the breadth of scope necessary to understand the functionality required building a tissue banking system. Some of those centers that could be surveyed may include EDNR, California, JPL, CPCTR, CalBG, Memorial Sloan Kettering, MD Anderson, Daedalus, and UPMC.</li> </ul>



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	<ul style="list-style-type: none"><li>○ The workspace decided to postpone the face to face meeting until the appropriate individuals from the institutions representing databases of interest could be identified and are available</li></ul>				
Agenda Item #2 : Face-to-face meeting	<ul style="list-style-type: none"><li>• For the face-to-face meeting, each database representative should provide a 15 – 20 minute presentation – this leaves time for Q &amp; A afterwards. To keep the presentations on track, an outline should be generated and circulated to the presenters when they are approached about presenting at the face to face.<ul style="list-style-type: none"><li>○ Mark Watson agreed to take a first cut at the presenters outline</li><li>○ UAB and MSKCC would like to present their database at a face-to-face meeting.</li></ul></li><li>• Bill Grizzle stated that he would like to write a rough draft of a caBIG TBPT scenario for an IRB/data-sharing whitepaper to be presented at the PRIMR (<a href="http://www.primr.org">http://www.primr.org</a>) Conference in late October. PRIMR group is considering writing a white paper.</li><li>• It would be beneficial if liaisons from Architecture and VCDE were present at the TBPT F2F meeting. They could give short presentations on caBIG compatibility/terminology issues. More importantly, they can provide guidance and feedback on the methodologies of the TBPT WS.</li><li>• It is important at the face-to-face meeting to share use cases, work flows, architecture and features by asking centers to demo their software and/or present screen shots (the donor portion, investigator portion, networking and bar-coding etc pages).</li></ul>				
Other discussion items:	<ul style="list-style-type: none"><li>• For the purpose of making caTIES available and usable by the community, an automated de-identification tool for scrubbing pathology reports is required. The workspace needs to identify a good de-identification tool for automated scrubbing of pathology reports<ul style="list-style-type: none"><li>○ There was unanimous agreement that an automated de-identification tool was needed and that all institutions would benefit from the tool.</li><li>○ The workspace needs to carry out a survey of available de-identification tools</li><li>○ UPMC has suggested the De-Id tool adoption by caBIG. De-Id is now licensed so a license agreement would have to be obtained between caBIG and the license owner.</li><li>○ MSKCC has an Oracle based (PL/SQL) de-identification protocol. The tool is not currently open-source, but may be made available to the community.</li></ul></li><li>• There is only one de-identification tool known to have been published (the UPMC De-Id tool). The group requested access to this manuscript.</li></ul>				
<table><tr><td>Name Responsible</td><td>Action Item</td><td>Date Due</td><td>Notes</td></tr></table>		Name Responsible	Action Item	Date Due	Notes
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	Name Responsible	Action Item	Date Due	Notes
	Bill Grizzle	Obtain short-term license for De-Id software. Will share data over the		
	Greg Eley	Look into De-Id licensing options.		
	Rebecca Crowley	Provide an overview of an automated pipeline for de-identification tools (MMSK & UPMC).		
	Greg	Make a list of people who absolutely have to present at the face-to-face meeting, and then determine their availability.		
	Greg	Contact EDNR to discuss their database system		
	?	Conduct a survey of De-id software available.		
	Bill Grizzle	Address TBPT HIPAA/IRB issues in white paper for PRIM&R.		